PTO/SB/06 (08-03)
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CLAIMS AS FILED - PART (Column 2) SMALL ENTITY OR SMALL ENTITY			e for Form PTC)-875 ·			10	2 320 C	7		
COLUMN 1		LI AIMS AS EILED			Substitute for Form PTO-875						
Sample S	FOR	•			SMALL ENTITY		OR	OTHER THAN SMALL ENTITY			
BASIC FEE	FOR NUMBER FILED		NUMBER EXTRA		RATE	FEE		RATE	FFF		
37 CFR 1.16(c)	(37 CFR 1.16(a))					s	OR				
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		minus 20 =			x \$=		OR-	x s=			
"If the difference in column 1 is less than zero, enter "o" in column 2. CLAIMS AS AMENDED - PART II CLAIMS AS AMENDED - PART II CLAIMS CALAIMS HIGHEST PRESENT RATE ADDITIONAL FEE OR OTHER THAN SMALL ENTITY RATE ADDITIONAL FEE OR X5 = OR X5]	X \$=		OR	x \$=			
CLAIMS AS AMENDED - PART II 3 V 0 5 (Column 1) (Column 2) (Column 3) SMALL ENTITY OR OTHER THAN SMALL ENTITY CLAIMS REMAINING NUMBER PRESENT PRESENT FARE MODILITIONAL FEE Total (17 CFR 1.16(c)) S Minus 2 2 5	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				+ \$=		OR.	+\$=			
Column 1 Column 2 Column 3 SMALL ENTITY OR OTHER THAN SMALL ENTITY	* If the difference in column 1 is less than zero, enter "O" in column 2.				TOTAL		OR	TOTAL			
Column 1) (Column 2) (Column 3) SMALL ENTITY CLAIMS CAIMS COLUMN 2) (Column 3) SMALL ENTITY TOOL TOOL STATE ADDI- TOTAL A	CLA	IMS AS AMENDED -	PART II			•					
CLAIMS HIGHEST PRESENT RATE ADDI- TIONAL FEE	3/4/05	(Column 1)	(Column 2)	(Column 3)	· SMALL E	ENTITY	OR				
TOTAL ADDL FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST PRESENT RATE ADDI- REMARKING NUMBER PRESENT RATE ADDI-	< .	REMAINING AFTER	NUMBER PREVIOUSLY		RATE	TIONAL			ADDI- TIONAL		
TOTAL ADDL FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST PRESENT RATE ADDI- REMARKING NUMBER PRESENT RATE ADDI-	Total (37 CFR 1.16(ci)			4	X \$=		· OR	X 5 =			
TOTAL ADDL FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST PRESENT RATE ADDI- REMARKING NUMBER PRESENT RATE ADDI-	M (37 CFR 1.16(6))) Minus	 3	=	X \$=		OR	X \$=			
Column 1)	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(7))				+\$=		OR	+\$ =			
CLAIMS HIGHEST PRESENT RATE ADDI-		V					OR				
CLAIMS HIGHEST PRESENT RATE ADDI-	((Column 1)	(Column 2)	(Column 3)							
	8 1	CLAIMS REMAINING AFTER	HIGHEST NUMBER PREVIOUSLY	PRESENT	RATE			RATE	ADDI- TIONAL FEE		
Total . Minus = x 2 = OB x 2 = =	Total .	Minus	••	= .	x \$=		OR	x s=	·		
Independent	(1) Cas case (ell)	Minus	•••	=	x s=	÷ ,	OR	X \$=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+5 =		OR	+5 =			
TOTAL TOTAL ADD'L FEE OR ADD'L FEE	•				TOTAL		OR		· ·		
(Column 1) (Column 2) (Column 3)			(Column 2)	(Column 3)			_				
CLAIMS REMAINING REMAINING H AFTER PREVIOUSLY PAID FOR CLAIMS REMAINING REMAINING REMAINING RATE ADDI- TIONAL TIONAL FEE FEE FEE		REMAINING AFTER	NUMBER PREVIOUSLY		RATE	· TIONAL		RATE	TIONAL		
Note	S STORY THEOR	Minus		=	X 1 =		OR	x \$=			
Z Independent " Minus "" = X 1 = OR X 1 ==	U (37 CFR 1.16(b))	Minus	***	=	X 1=		OR	X \$=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 OFR 1.16(d)) 4 5 E OR + 5 E	FIRST PRESENTATE	+ \$_ =		1	+ ; =	•					
TOTAL TOTAL ABOLIFEE OR ADDITIES					TOTAL		0.7	TOTAL			
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. 1 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".		inn 1 is less than the entry	in column 2, wri	te "0" in column :	3.		_				

The "Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate bor in column 1.
This collection of internation is required by 37 CFR 1.15. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case, Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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